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CONFIRMATION NO. 5750

<b>SERIAL NUMBER</b> 10/606,910	<b>FILING OR 371(c) DATE</b> 06/26/2003 <b>RULE</b>	<b>CLASS</b> 607	<b>GROUP ART UNIT</b> 3762	<b>ATTORNEY DOCKET NO.</b> 10806-122A	
<b>APPLICANTS</b> Sverker Norrby, Leek, NETHERLANDS; Pablo Artal, Murcia, SPAIN; Patricia Ann Piers, Groningen, NETHERLANDS; Marrie Van Der Mooren, Engelbert, NETHERLANDS;					
<b>** CONTINUING DATA *****</b> This application is a DIV of 09/863,546 05/23/2001 PAT 6,609,793 which claims benefit of 60/207,734 05/26/2000 and claims benefit of 60/259,924 01/05/2001					
<b>** FOREIGN APPLICATIONS *****</b> SWEDEN 0001925-7 05/23/2000 SWEDEN 0004830-6 12/22/2000					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 09/17/2003</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged <i>[Signature]</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> NETHERLANDS	<b>SHEETS DRAWING</b> 11	<b>TOTAL CLAIMS</b> 42	<b>INDEPENDENT CLAIMS</b> 3
<b>ADDRESS</b> 22865					
<b>TITLE</b> METHODS OF OBTAINING OPHTHALMIC LENSES PROVIDING THE EYE WITH REDUCED ABERRATIONS					
<b>FILING FEE RECEIVED</b> 1146	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		